

# **BC** Newsletter

Volume 1. Number 1

DENTAL BUREAU

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# President's Message Greetings from the Dental Bureau!

We are pleased that the transition from the Dental Board to the Dental Bureau as mandated by the Sunset provision of recent legislation was seamless. We are delighted and honored to have Cathy Poncabare at the helm as our new Executive Officer and that we have moved our offices to a new state of the art facility at 2005 Evergreen Street, Suite 1550, in Sacramento.

You will note in the following articles that we are moving forward with measures to enhance your license as well as to protect the public. Of interest are proposed modifications to the DBC's continuing education (CE) requirements. As a result of our meeting in August, we expect important changes to go into effect within approximately a year. License holders should be able to count CE units acquired via completion of courses given by providers approved by the American Dental Association's CERP program or the Academy of General Dentistry's PACE program, in addition to those from California-approved CE providers. We feel this is a significant move forward to streamline continuing education as well as maintenance of your license.

Our most recent Advisory Committee meeting was in conjunction with the Professionals Achieving Consumer Trust (PACT) Summit 2008 sponsored by the California Department of Consumer Affairs (DCA) and the California Consumer Affairs Association. The Summit was held from November 18-21, 2008 at the Westin Los Angeles Airport and was a fantastic opportunity for board/bureau members, consumer advocates, law enforcement, stakeholders and the public to meet. The value of the license was reaffirmed by each of the chairs of the boards and bureaus under the jurisdiction of DCA as the PACT agreement was signed by all. Participants had an opportunity to observe other board/bureau meetings taking place simultaneously over the five day

event as well as to take part in small group learning sessions. As a direct result of one of the workshops at the Summit, developing an outreach program for emergency preparedness and the role of the dental health care provider in a community disaster will be a topic of discussion at one of our meetings in 2009.

The theme of the DBC Advisory Committee meeting at the Summit was Access to Care with an Aging Population, Recognizing that poor oral health is the primary risk factor for major catastrophic illnesses including heart attack and stroke, and that the longevity of our population is increasing, maintaining oral health in today's climate is paramount. Seniors are now living not only in traditional at-home environments, but are also spending weeks or months in physical therapy centers after such surgical therapies as hip or knee replacement. Access to dental care in these facilities is important to maintain health. As seniors age, there are ongoing questions in terms of drug interactions with dental pharmaceuticals, informed consent and the nature and extent of dental therapy. Our guest speaker at the Thursday session of our Advisory Committee meeting was Dr. Roseann Mulligan, Professor, USC Davis School of Gerontology. It was clear from Dr. Mulligan's presentation "Treating Geriatric Dental Patients: What Are the Issues" that geriatric issues facing dental health care professionals are far reaching, especially involving those who are now beginning to enter the more advanced aging process, such as Baby-Boomers. It is anticipated that a one day symposium will be organized in 2009 to further discuss this issue and how it impacts dentistry.

Another important role for the DBC during the Summit was co-sponsoring a forum addressing the topic of e-Prescribing with the Medical and Pharmacy Boards. It is well known that electronic prescribing is inevitable, and at this forum, stakeholders and members of the public were

# **Executive Officer's Report**

On behalf of the entire staff of the Dental Bureau of California (DBC), welcome to the inaugural Winter edition of our bi-annual newsletter.

The DBC provides a wide range of services, from administering examinations, issuing and renewing licenses and permits, to the intake and investigation of consumer complaints. We pride ourselves in the customer service we afford California's dental health care professionals and consumers.

In each issue of our newsletter, my Executive Officer's report will focus on a new service or change in an existing service we provide our clients. Effective January 1, 2009, licensees of the DBC and the Committee on Dental Auxiliaries (COMDA) must complete and submit a dental health care workforce survey upon initial application and licensure renewal. We encourage DBC licensees to utilize the on-line licensure renewal process, which is a far more efficient and cost effective method to renew your license and complete the mandatory survey. Please see below for a more detailed description of AB 269.

Effective January 1, 2009, the DBC will resume scheduling mandatory Onsite Inspections and Evaluations for General and Medical Anesthesia and Conscious Sedation permit holders.

We thank the members of our Advisory Committee for their contribution to the newsletter, and as importantly, the staff of the DBC for their significant role in the design and content of our newsletter.

We hope you enjoy the DBC Newsletter and find it both informative and useful. Cathleeen J. Poncabare

# President's Message continued

able to address their views and concerns. Of note to dental stakeholders is the issue of the ability of existing dental software systems to support and integrate with the existing and proposed e-Prescribing systems.

The DBC was honored to have Rosario Marin, Secretary of the State and Consumer Services Agency and DCA Director Carrie Lopez visit our Advisory Committee meeting, who in turn honored the contributions made from our former members Dr. Louis Turchi, Dr. Ronald Mito, Larry Sheingold, Dr. Michael Lew and Joyce Yale, RDH.

The Friday session of our Advisory Committee meeting was highlighted with a presentation by Angela Minniefield, Deputy Director of the Healthcare Workforce Development Division at the Office of Statewide Health Planning and Development, who discussed the potential workforce shortage for dental health care professionals that California expects to experience in the next several years. This issue was found to be of such importance that a new committee of the DBC was formed.

Our next meeting will be held January 21, 2009 in San Diego. I encourage all of you to visit the DBC web site at www.dbc.ca.gov for meeting times, locations and agenda items. We welcome you to attend and participate. Suzanne McCormick, DDS, President **COMDA Chair Report** 

By Judith Forsythe, RDA, COMDA Chairperson, Committee on Dental Auxiliaries

The Committee on Dental Auxiliaries (COMDA) has existed for more than 35 years, but effective July 1, 2009, dental assisting will be under the jurisdiction of the Dental Board. For dental assistants, the change will bring an expansion of duties for licensees, and new permit categories for orthodontic assistants and dental sedation assistants. Upcoming information will be posted on the COMDA Web site.

I am pleased to report that Donna Kantner, Dental Board Legislative Analyst, will take the lead in implementing the new laws. She has spent more than 13 years at COMDA and more than three years at the Dental Bureau, and has vast program knowledge. Dental assisting issues will be well represented.

The Dental Hygiene Committee of California (DHCC), a first for California, will be effective July 1, 2009. The DHCC will consist of nine members appointed by the Governor: four public members, one practicing dentist, and four dental hygienists (one educator and one in alternative practice or extended functions). The current COMDA Executive Officer, Lori Hubble, will become the first Executive Officer of the DHCC.

I have truly enjoyed my tenure as a COMDA member and serving as chairperson this past year. We have accomplished much thus far, and I am looking forward to serving dental auxiliaries in the State of California for years to come.

# Licensees asked to complete healthcare survey

Recent legislation (AB 269) was signed into California law that *requires* the Dental Board of California (DBC) and the Committee on Dental Auxiliaries (COMDA) to collect data from all licensees with the purpose of identifying areas in California that are underserved with professionals with cultural or linguistic competencies in the dental health care field.

Effective January 1, 2009, all initial licensure applicants and license renewal applicants will be required to report the following information to the Dental Board of California and the Committee on Dental Auxiliaries pursuant to Business and Professions Code Section 1715.5 as follows:

- Completion of any advanced educational programs accredited by the Committee on Dental Accreditation in a dental specialty recognized by the American Dental Association [Business & Professions Code § 1715.5(a)]
- Practice or employment status [Business & Professions Code § 1715.5(b)]

Reporting information regarding cultural background and foreign language proficiency is optional. All survey information will be collected and aggregated annually to be reported on the DBC/COMDA web sites.

# A letter to the recently licensed dentist

By Luis Dominicis, DDS Member, Dental Bureau of California

If you graduated from dental school not too long ago and have recently obtained the privilege to practice dentistry in the Golden State, I would like to personally congratulate you. You have shown discipline, resolve and determination. It wasn't easy getting through all those years of dental school, the National Boards and the clinical exams.

The resources and time that you spent in obtaining, first a dental degree and then a dental license, were substantial. Not only did it include countless hours of studying, practicing and devoting yourself wholeheartedly to absorbing as much dental knowledge as possible but it also included a significant financial cost.

Even though you have already passed a Law and Ethics examination, you should keep in mind that when it comes to law and ethics, you should never stop learning and educating yourself in these matters. You need to remember that you will never know too much about something that will help you provide better service to your patients and at the same time, might keep you out of trouble.

It gives me great grief to see newly licensed dentists get in difficulties and even lose their license. One of the main reasons they got into difficulty is because they forgot about the purpose for which they went to dental school: to provide the best possible treatment to their patients.

First and foremost, you are always to keep the patient's well being at the forefront. That means putting yourself in the place of the patient at all times and answering these simple questions:

- Did you treat the patients with the respect and discretion they deserved?
- Did you place the patient's interest and well-being before your own?
- Is this the kind and type of treatment that you would have liked to
- Does this treatment address the needs and wants of the patient?
- Are you competent to provide adequate treatment in this particular
- Would you feel proud to have your colleagues see the results of your treatment?
- Did you act and behave in such manner that your family and friends would not be embarrassed to say they know you?

The pressure can be great: There could be more patients waiting to be treated, there are overhead expenses to take care of, and student loans to pay, but you must be determined when it comes time to protecting and caring for your patient. You can't forget, even for a moment, that allimportant mantra: "First do no harm."

Whether you are in a solo practice, work as an associate or work for someone else, do not forget that whatever you say or do to a patient, you and only you, are responsible for that patient. Do not let a moment of carelessness throw away all that you have accomplished and obtained. Make sure you are fully engaged before you place your fingers in your patient's mouth.

# Preventive enforcement aims to help licensees

By Harriet Seldin, DMD, MBA, Member, DBC Advisory Committee

The mission of the Dental Bureau of California is to protect California consumers of dental care. An important part of protecting the public is enforcement through a process that not only protects the public but is fair and transparent to licensees. An educated RDA, RDH, DDS, etc. is less likely to inadvertently break the law. We'd much rather educate and inform in advance than discipline the licensee later. This is the philosophy of preventive enforcement.

Our enforcement staff is always eager to educate. DBC has a booth at California Dental Association meetings in Anaheim and in San Francisco. Staff offer enforcement education courses to licensees as requested.

DBC's Disciplinary Guidelines are posted on the DBC Web site. If you have questions, that document is a good place to start. It notes the range of discipline (citation to revocation) for various offenses. However, DBC is in the process of revising the Disciplinary Guidelines and placing them into regulations. There will be time for public input during hearings that will be

held in the next few months. The dates and agenda will be published on the DBC Web site, or you can contact DBC by phone or e-mail for further information. DBC welcomes dental community stakeholder input as the guidelines are revised.

The periodic, mandatory Dental Practice Act continuing education classes help keep everyone up to date, but licensees aren't always aware that misconduct outside the dental office may also get a licensee in trouble. For example, DUI convictions and convictions for theft may result in license discipline such as probation. A dentist practicing while on probation may not be able to contract with insurance companies and may have difficulties seeking employment. It is much better to learn the rules in advance.

The goal of enforcement is to protect the public, not to be punitive to the licensee. The goal of preventive enforcement is to give you the tools to live and practice within the law.

# The Dental Diversion Program provides recovery for impaired licensees

By Dr. John Bettinger, Vice President, Dental Bureau of California

For more than 25 years, the Dental Board and the Dental Bureau's Alcohol and Drug Diversion Program has assisted impaired dentists, dental hygienists, and registered dental assistants. According to the American Dental Association (ADA), "Dentists are no more—or less—likely to develop substance use disorders (alcohol or drug abuse or dependence) than the general population. In other words, 10–15 percent of dentists will have a drug and/or alcohol problem sometime in their lives." Substance use disorders are part of the human condition, and touch as many as one in four American families. "What is different for dentists and other health professionals than for the general population is the public trust that goes with the privilege to practice, and the responsibility to obey the State Dental Practice Acts and controlled substance regulations. An untreated substance use disorder in a dentist can not only threaten the dentist's life and family stability, but place patients, and the practice itself, in jeopardy."

The Dental Diversion Program provides a pathway for license holders to seek rehabilitation from drug and alcohol addiction while retaining their license. The license holder progresses in his or her recovery with close monitoring for public protection. As the participants demonstrate continued recovery, develop a deeper understanding about the illness of addiction. and take the necessary steps to regain control of their lives, they may "graduate" from the program.

Participants may enter the Diversion Program through one of three paths:

• Self-referral occurs when the participant (license holder) or a concerned friend, co-worker, family member, or patient contacts the Program Manager of the Dental Bureau on a confidential basis. Selfreferral is voluntary.

- Investigative referral occurs when a license holder or participant is referred to Diversion through the complaint and/or investigative process. Traditional disciplinary action may be suspended pending successful completion of Diversion. This path is also voluntary, and is a win-win for the participant, the public, and the Bureau's Enforcement Unit. Costly and labor-intensive legal action can often be avoided by choosing this path.
- Probation referral is not voluntary, but instead is required as a condition of probation.

The Dental Diversion Program currently uses two Diversion Evaluation Committees (DECs) in Northern and Southern California, and Maximus, an outside contractor. The use of an independent outside contractor is critical to the success of the Program. Maximus provides the DECs and the Program Manager with the information needed to develop treatment plans that help the participant in recovery while protecting the public.

SB 1441, which was signed into law this year, modified the Business and Professions Code statutes related to Diversion by developing broad quidelines that will apply to all Boards, Bureaus and Committees under the auspices of the Department of Consumer Affairs. The most important result of this bill is increased consumer protection while assisting the licensee in his or her rehabilitation. More information about SB 1441 is available on the Legislative Counsel's Web site, www.leginfo.ca.gov.

For more information on the Dental Bureau of California's Diversion Program, or if you are interested in applying for a position on a Diversion Evaluation Committee, please contact Richard DeCuir at (916) 263-2188 or log onto the Bureau's Web site at www.dbc.ca.gov and click on Diversion.

# Portfolio Assessment Concept moves ahead

By Dr. Stephen M. Casagrande, Secretary, Dental Bureau of California

Licensure of dentists practicing in the State of California has been one of the primary duties of the Dental Bureau of California (DBC) and has its roots in the Dental Practice Act, which charges the DBC to test candidates for minimum competency to ensure public protection. It calls for a written and clinical exam and asks for an acceptable clinical performance in a given time period on both patients and manneguins. The California Board Exam and, as of late, the Western Regional Exam for the most part mimic the other stand-alone Regional Exams in their content. They have all evolved over the years to better address relevancy, competency, fairness, and bias. The changes continue today with calls for a national exam that would be universally accepted by all the states.

In January of 2007, the DBC began the process of re-evaluating the exam and working with the five dental schools in California to explore alternative methods of assessing a dental school candidate for licensure. The Portfolio Assessment was born out of the desire to eliminate the need to

give a stand-alone exam to those candidate students who could meet the requirements set by the DBC. While this new type of assessment would exceed the present requirements for testing on patients, it is also based on achieving a required number of clinical experiences. The required clinical experiences in diagnosis and treatment planning, periodontics, direct and indirect restorative, prosthodontics, and endodontics, will be tested on patients of record in the schools by way of the competency exams with oversight by the Bureau. Calibration, standardization, verification, and cooperation will be important components of this new and novel approach to assessing candidates.

Before the Board went into sunset, it unanimously passed the Portfolio Assessment Concept and directed staff to have it evaluated by testing experts before writing the legislation needed for implementation. It is a very exciting time to be part of this dynamic and evolving process.

# **DBC Advisory Committee meets at new office**

By Lori Reis, Manager, DBC Complaint and Compliance Unit

On August 28, 2008, the Dental Bureau of California (DBC) held a one-day advisory committee meeting at our new location at 2005 Evergreen Street, Suite 1550, Sacramento, California.

The meeting included an onsite luncheon hosted by the DBC and the Committee on Dental Auxiliaries (COMDA). Attending were DCA Director Carrie Lopez, representatives from the DCA Executive Office and the State and Consumer Services Agency, Advisory Committee members, DCA Personnel staff, and DBC. After lunch, an open house was held to tour the DBC and COMDA's new offices.



pictured left and Judith Forsythe, COMDA Committee Chairwoman.

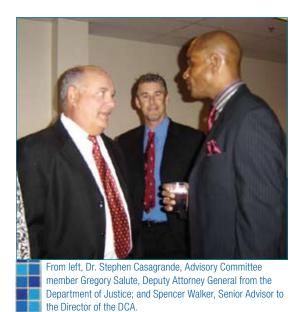
Advisory Committee member.

Pictured above is Cathy Poncabare, Executive Officer of the DBC and Sarah Wallace, Administrative Analyst.









# DEPARTMENT OF CONSUMER

COMDA staff attending the event included Gordon Redoble, Dorothy Perez and Traci Napper.

# DBC and COMDA at the 2008 California Dental Association Fall/Winter Scientific Session

By Lori Reis, Manager, DBC Complaint and Compliance Unit

On September 11, 2008, staff from the Dental Bureau of California (DBC) and the Committee on Dental Auxiliaries (COMDA) arrived early to set up booths and computers, and eagerly await the arrival of dentists, dental hygienists and dental assistants from Northern California. Our role was to explain the DBC and COMDA's programs. To accomplish this mission, staff was available each day to answer questions, distribute instructional brochures, and provide instruction and access to our Web site. This included information on examination, licensing, permit processing, enforcement, complaints, and discipline. Also present was staff from the DBC's Diversion Program who provided information on the program.

The DBC strives to bring information directly to our stakeholders and consumers through outreach efforts such as presentations to community and consumer groups and distributing consumer information at events. The DBC also develops partnerships with other community, city, county, and State consumer protection leaders who are working to help consumers become proactive. Outreach continues to be a strong mission of the DBC and COMDA.



Dawn Dill, Complaint Analyst, and Lori Reis, Manager of the Complaint and Compliance Unit.



Cathy Poncabare, Executive Officer of the DBC, sharing ideas with John Bettinger, DDS, Vice President of the DBC.



Pictured left to right are Lori Reis, Complaint and Compliance Unit Manager, Richard DeCuir, Assistant Executive Officer, Cathy Poncabare, Executive Officer, and Christopher Vick, Complaint Intake Technician.

# California Dental Association Peer Review Conference

By Lori Reis, Manager, DBC Complaint and Compliance Unit

The California Dental Association (CDA) cordially invited the Dental Bureau of California (DBC) to participate as guest speakers at their Peer Review Conference on August 22, 2008. The topic of discussion was the functionality of the DBC's Complaint and Compliance Unit.

Lori Reis, Manager of the Complaint and Compliance Unit provided a brief synopsis on the complaint process to about 50 chairmen and vicechairmen from various local component societies across the State of California. After her presentation, she opened up a question and answer period which was very well received. Questions pertaining to all aspects of the complaint and enforcement process were answered as well as many others such as, what happens now that we are no longer a Board, but instead a Bureau?

Having only begun her career as the Manager of the Complaint Unit just a few months before speaking, Lori invited Richard DeCuir, Assistant Executive Officer and Dawn Dill, Lead Analyst of the Complaint Unit to assist her in answering questions.

The DBC's mission is to protect and promote the health and safety of consumers by licensing those dental health care professionals who demonstrate competency, taking action to enforce compliance with the Dental Practice Act and the laws of the State of California, and enhancing the education of licentiates and consumers. By continuing to be accessible at events such as this, we continue to greatly achieve our mission.

# Sunrise, sunset—What happened to my Board?

Many licensees have guestions regarding the status of the Board. Following are some common questions and answers.

### If the Dental Board sunsets, how does that affect my license?

The Board's transition to a Bureau does not affect any license. Bureau staff are the same Board staff that handled exams, licensing, and enforcement and continue to do their work as usual.

### If there is no Board, who makes the decisions?

Although the Board was sunset, the Board members were all invited to be members of the Advisory Committee created by SB 797. Most of the previous Board members elected to serve as Advisory Committee members. These members act in the same capacity as Board members, and make recommendations to the Director of the Department of Consumer Affairs, who makes the final decision.

### Will the Board be a Bureau from now on?

No. AB 1545, which was signed by the Governor, provides that, effective January 1, 2009, the Dental Bureau will again become the Dental Board, and the former Dental Board members may be re-appointed to the new Board.

### Why was the Board sunset?

At the end of the legislative cycle, many bills are passed at the same time. Some bills are amended or changed and others are not amended before the legislative deadline. Last year, four boards, the Dental Board, the Speech-Language Pathology and Audiology Board, the Board of Vocational Nursing and Psychiatric Technicians, and the Board of Barbering and Cosmetology, were sunset because no bills were passed to extend their sunset dates. This was addressed by urgency bill SB 797, which continued each Board as a Bureau with an advisory committee composed of former Board members, and AB 1545, which re-established all four Boards as of January 1, 2009, with the provision that previous Board members may be re-appointed.

# Registered Dental Hygiene Committee begins on July 1, 2009

The passage of SB 853 this year will create a new Registered Dental Hygiene Committee, beginning July 1, 2009. The Committee on Dental Auxiliaries (COMDA) will cease to exist on that date, and the dental assisting examination and licensing functions will be transferred to the Dental Board.

The new Dental Hygiene Committee will consist of nine members appointed by the Governor: four public members, four registered dental hygienists, and one practicing dentist. The Dental Board and the Committee on Dental Auxiliaries are working together to ensure a smooth transition over the next several months so that dental assistants, Registered Dental Assistants, and Registered Dental Assistants in Extended Functions, continue to receive the quality of service that they have come to expect from COMDA.

Lori Hubble, Executive Officer of COMDA, will become the first Executive Officer of the new Dental Hygiene Committee.

# **New Regulations**

Registered Dental Hygienist in Alternative Practice (RDHAP) **Applications. Amended Business** and Professions Code Section 1079.2 to define more broadly the Registered Dental Hygienist (RDH) clinical practice settings that will count toward the required 2,000 clinical practice hours to obtain RDHAP licensure. This will allow RDH licensees who have clinical practice hours in a public health, educational, or other non-private practice settings to use those clinical hours to qualify for and be issued an RDHAP license, if all other requirements are met.

Licensure by Residency. Amended **Business and Professions Code** Section 1021, and added Sections 1028.2. 1028.3. 1028.4 and 1028.5 to allow applicants who qualify for California dental licensure under the provisions of SB 683 (Ch. 805, Stats. 2006) through completion of a minimum one year general practice residency or advanced education in general dentistry program that is approved by the ADA's Commission on Dental Accreditation to apply for and obtain a dental license, if all other requirements are met.

# New specialty permits and upcoming changes for dental assistants

AB 2637, recently signed by the Governor, will have a wide-reaching impact on all unlicensed dental assistants and their employers, as well as applicants for Registered Dental Assistant (RDA) or Registered Dental Assistant in Extended Functions (RDAEF) licenses. AB 2637 allows new duties in all of these categories, and creates two new permit categories: the Orthodontic Assistant Permit and the Dental Sedation Assistant Permit. COMDA is currently working with educational program and course providers so that Board-approved programs and courses are available and contain instruction in the new duties before this law becomes effective.

Here are some of the changes that will take effect January 1, 2010:

Dental assistants as of January 1, 2010 will be able to perform intraoral and extraoral photography, take facebow transfers and bite registrations, take intraoral impressions for all nonprosthodontic appliances and read and transmit information from a monitor display to the dentist during oral surgery procedures.

AB 2637 requires that an employer is responsible for ensuring that a dental assistant who has been in continuous employ for 120 days has successfully completed Board-approved courses in the Dental Practice Act, in basic life support and an eight-hour course in infection control within one year.

Dental assistants must have 15 months of work experience or complete a Board approved registered dental assisting program before applying for the written and practical exam to become an RDA.

### Orthodontic Assistant and Dental Sedation Assistant Permits.

After January 1, 2010, an applicant who has completed 12 months of experience as a dental assistant and Board approved courses in the Dental Practice Act, infection control, basic life support, and a Boardapproved dental sedation assistant or orthodontic assistant course may apply for a written examination administered by the Board. After successfully completing the written exam, an Orthodontic Permit or a Dental Sedation Assistant Permit may be issued by the board. The dental sedation assistant or orthodontic assistant course may not begin until a dental assistant has completed at least six months' work experience.

RDAs licensed after January 1, 2010, must have education and training to chemically prepare teeth for bonding, place bonding agents, and place, adjust and finish direct provisional restorations. All RDAs licensed after January 1, 2010, may perform these duties.

An RDA licensed on or after January 1, 2010, must submit evidence of successful completion of a Board-approved application of pit and fissure sealants course prior to their first renewal that requires the completion of continuing education. This is usually the second renewal for most new licensees.

Currently licensed RDAs must complete Board-approved education and training before they may chemically prepare teeth for bonding, place bonding agents, and place, adjust and finish direct provisional restorations.

As of January 1, 2010, the supervising licensed dentist is responsible for determining whether an authorized procedure performed by an RDA should be performed under general or direct supervision, except for procedures performed in specified public health clinics pursuant to Section 1204 of the Health and Safety Code or a clinic owned and operated by a hospital that maintains the primary contract under Section 17000 of the Welfare and Institutions Code. Within these specified clinics, coronal polishing, application of topical fluoride and application of sealants are allowed by either RDAs or RDAEFs under the direct supervision of a Registered Dental Hygienist or Registered Dental Hygienist in Alternative Practice.

Possibly the most changed license is the RDAEF. Several new duties have been added to this license that may be performed by RDAEFs licensed after January 1, 2010. Currently licensed RDAEFs may perform these new duties after successfully completing an examination.

RDAEFS licensed after January 1, 2010 may, under the direct supervision of the dentist:

- 1. Conduct a preliminary evaluation of the patient's oral health, including, but not limited to, charting, intraoral and extra-oral evaluation of soft tissue, classifying occlusion, and myofunctional evaluation.
- 2. Perform oral health assessments in school-based community health project settings under the direction of a dentist, RDH, or RDHAP.
- 3. Cord rectration of gingiva for impression procedures.
- 4. Size and fit endodontic master points and accessory points.
- 5. Cement endodontic master points and accessory points.
- **6.** Take final impressions for permanent indirect restorations.
- 7. Take final impressions for tooth-borne removable prosthesis.
- 8. Polish and contour existing amalgam restorations.
- 9. Place, contour, finish and adjust all direct restorations.
- 10. Adjust and cement permanent indirect restorations.

An RDAEF may also perform all duties and procedures that an RDA is authorized to perform.

Currently licensed RDAEFs must successfully complete an examination consisting of the procedures above before they may perform procedures 1, 2, 5, 7, 8, 9, and 10.

# Legislative update

SB 797 (Ridley-Thomas)—Sunsetted boards. Effective immediately, provides continuity for the executive officers of the Dental Board, Speech-Language Pathology and Audiology Board, Board of Vocational Nursing and Psychiatric Technicians and Board of Barbering and Cosmetology. The bill, which also provides that Board members be appointed as Advisory Committee members subject to all provisions and procedural requirements of the prior boards, is effective only until January 1, 2009, when all of the Boards are re-established by AB 1545 (see below).

AB 1545 (Eng)—Regulatory Boards Re-establishment. Effective January 1, 2009, re-establishes the Dental Board, Speech-Language Pathology and Audiology Board, the Board of Vocational Nursing and Psychiatric Technicians, and the Board of Barbering and Cosmetology that were sunsetted on July 1, 2008. The Dental Board is re-established with the same composition, powers, and responsibilities as the previous Board. The bill also allows former Board members to be appointed to the new Boards. The new sunset date is January 1, 2012.

AB 2210 (Price)—Dentistry: Emergency services. Effective January 1, 2009, allows a licensee to provide emergency care during a declared state of emergency according to his or her dental education and emergency training.

AB 2637 (Eng)—Dental Auxiliaries. Effective January 1, 2010. repeals previous provisions that established new specialty license categories for registered surgery assistants and registered orthodontic assistants and replaces them with a permitting process. The bill adds new duties for dental assistants, registered dental assistants and registered dental assistants in extended functions, and adds the requirement that educational programs and courses must include instruction in the new duties to retain Board approval. As of January 1, 2010, employers are responsible for ensuring that a dental assistant who has been in continuous employ for 120 days has successfully completed Boardapproved courses in the Dental Practice Act and Basic Life Support, and an eight-hour Board-approved course in Infection Control within one year of employment. (The provisions of this bill are detailed in the article on Page 8.)

SB 853 (Ridley-Thomas)—Dental hygiene. Effective July 1, 2009, creates a new Registered Dental Hygiene Committee consisting of four public members, four registered dental hygienists, and one practicing dentist. The Committee on Dental Auxiliaries (COMDA) will cease to exist on that date, and its dental assisting examination and licensing functions will be transferred to the Dental Board.

SB 1178 (Aanestad)—Sex offenders. Effective January 1, 2009, includes federal law and specifies that the Board shall not reinstate a license and issue a stay of denial and place the license on probation. This bill was requested by the Board to clean up language in last year's SB 252.

SB 1441 (Ridley-Thomas)—Healing arts practitioners: Alcohol and drug abuse. Effective January 1, 2009, requires the Department of Consumer Affairs (DCA) to conduct an audit of the effectiveness, efficiency, and overall performance of the vendor chosen by DCA to manage the diversion program, and to recommend program improvements based on the findings of the audit report. Establishes a DCA Substance Abuse Coordination Committee composed of the executive officers of the Department's healing arts boards to develop uniform and specific standards in various areas of the program that each board would be required to use in dealing with substance-abusing licensees. Stakeholders and individuals who have particular expertise in substance abuse issues may be invited to advise the Committee.

### SB 1454 (Ridley-Thomas)—Healing arts: Outpatient settings.

Effective January 1, 2010, requires a licensee's advertising to contain the type of license and the type of degree received upon graduation. in addition to existing requirements. Exceptions are made for a medical directory, billing statement, appointment reminder, and any advertisement of a healthcare service plan subject to the requirements of Section 1367.26 of the Health and Safety Code. Requires a healthcare practitioner to wear a name tag containing the practitioner's name and license status in at least 18-point type or to disclose the information verbally.

SB 1633 (Kuehl)—Dental services: Credit. Effective January 1, 2009. requires a licensee to provide a written treatment plan including the cost of each service to be provided, and specific written information regarding a loan or line of credit offered to a patient and to obtain the patient's signature before arranging or establishing a line of credit. If a patient is covered by a dental benefit plan or dental insurance, the treatment plan must indicate that the treatment may or may not be covered, and that the patient has the right to confirm dental benefits or insurance before beginning treatment. This information must be provided in writing in the language used to communicate with the patient, if other than English, and states that no credit arrangement can be made if a patient is under the influence of general anesthesia, conscious sedation, or nitrous oxide.

SB 1060 (Laird)—Tissue banks: Licensure. Effective immediately, exempts dentists practicing in a lawful practice setting from the requirement to be licensed as a tissue bank to store freeze-dried bone and dermis that was obtained from a licensed tissue bank to be used for implantation into a patient. The freeze-dried bone and dermis must be stored in strict accordance with the package insert and manufacturer's instructions.

# Disciplinary Actions September 2007 - April 2008



### **Decisions After Administrative Hearing\***

### Julie Castillo, RDA #70038

License granted and placed on probation for three (3) years. Required to file quarterly reports with the Board. Respondent had been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee, made a false statement on the application for licensure. The decision was effective September 28, 2007.

### Mark Evans, DDS #40433

License reinstated and placed on probation for five (5) years. Required to submit guarterly reports, take remedial education courses, and work in a supervised environment. The decision was effective September 28, 2007.

### Yosuf Korel, DDS #41443

Public Reprimand issued for failure to provide x-rays in a timely manner. The decision was effective on September 28, 2007.

### Hoang-Trang Tran, DDS #45041

License placed on probation for five (5) years based on conviction of a crime substantially related to the practice of dentistry. Required to submit quarterly reports, take a remedial education course, pay cost recovery and submit to auditing of billing practices. The decision was effective on October 19, 2007.

### Morris Cigar, RDA #52318

License was placed on probation for five (5) years for a conviction of as crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, pay cost recovery, be evaluated by the Diversion Program, abstain from drugs or alcohol, subject to random drug testing and pay cost recovery. The decision was effective on December 28, 2007.

### Katrina Guilatco Go. DDS #56664

Granted a probationary license with a term of five (5) years. Required to take and pass the examination for licensure, perform 100 hours of community service per year, file quarterly reports with the Board, and take an ethics course. Respondent had been found in possession of unauthorized notes in an attempt to subvert the licensing examination. The decision was effective on December 28, 2007.

### Ivette Maher, DDS #44931

License was revoked. Respondent was revoked based on her failure to comply with her probationary order from a previous Board action. The decision was effective December 28, 2007.

### Jumoke Oyedele, DDS #32252

License was placed on probation for seven (7) years for violating her probationary order with the Board. Respondent was originally placed on probation for committing acts of gross negligence, incompetence and repeated acts of negligence on a patient. Required to serve a 30 day suspension, submit quarterly reports, take remedial education courses and comply with original probationary order. The decision was effective on December 28, 2007.

### Bradley S. Nydegger, DDS #36970

Licensed revoked based on violation of probationary order. The decision was effective on January 11, 2008.

### Nazario Ortiz, RDA #53546

License was suspended for 180 days. Respondent was convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective January 1, 2008.

### Wen Hsiang Chou, DDS #45842

License revoked due to multiple counts of gross negligence, incompetence, and repeated acts of negligence. The decision was effective March 3, 2008.

### Farzan Laaly DDS #56900

Licensed granted and placed on probation for three (3) years. Respondent had been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee, made false statements on the application for licensure. The decision was effective March 28, 2008.

### Jagdeep Pannu, DDS #44755

License placed on probation for five (5) years. Respondent had been convicted of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to submitting quarterly reports, 10 hours per month of community service, no solo practice, evaluation by the Board's Diversion Program, submit to biological fluid testing, abstain from alcohol, controlled substances and dangerous drugs, and pay cost recovery. The decision was effective March 3, 2008.

### Lisa Henderson, RDA #71523

License was granted and placed on probation for three (3) years based on conviction of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to file quarterly reports with the Board and take a course in law and ethics. The decision was effective April 21, 2008.

### Gabriela Proell, RDA #71521

License was granted and placed on probation for three (3) years based on conviction of a of crime substantially related to the qualifications, functions, and duties of a licensee. Required to file quarterly reports with the Board, be evaluated by the Board's Diversion Program, abstain from the use of alcohol/controlled substances/dangerous drugs, and submit to biological fluid testing. The decision was effective April 21, 2008.

### Jack Sherman, DDS #23758

Public Reprimand was issued for unprofessional conduct related to dispensing of drugs. Required to pay cost recovery. The decision was effective April 21, 2008.

### Arash Mohammed-Zadeh, DDS #44423

License was placed on probation for a period of three (3) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. The Respondent is required to submit quarterly reports, attend psychotherapy sessions, biological fluid testing and abstain from the use of alcohol/controlled substances/dangerous drugs. The decision was effective August 2, 2008.

### **Default Decisions\***

### Heriberto Rivera-Acevedo, DDS #49200

License was revoked in a default decision. Respondent gave a false Social Security number in his application for licensure. The decision was effective September 28, 2007.

### Steven Afsahi, DDS #52034

License was revoked in a default decision. Respondent's dental license in Virginia was disciplined. The decision was effective September 28, 2007.

### Saul Ambriz, RDA #65661

License was revoked in a default decision. Respondent was found to have been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Donna M. Baker, RDA #54227

License was revoked in a default decision. Respondent was found to have been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Rosann Bartolmucci. RDA #48730

License was revoked in a default decision. Respondent was found to have been convicted of crimes substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Mehrdad Davari, DDS #40569

License was revoked in a default decision. Respondent was found to have been convicted of crimes substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Antonio Garcia, RDA #54714

License was revoked in a default decision. Respondent was found to have been convicted of crimes substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Evelyn P. Geary, RDA #37208

License was revoked in a default decision. Respondent was found to have been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Lynn Mackenzie, RDA #53660

License was revoked in a default decision. Respondent was found to have been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Sherri J. Norris, RDA #63898

License was revoked in a default decision. Respondent was found to have not complied with her previous probationary order. The decision was effective September 28, 2007.

### Maranell Howell, RDA #50970

License was revoked in a default decision. Respondent was found to have been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective March 3, 2008.



### **Default Decisions\***

### Patty Justice, RDA #64859

License was revoked in a default decision. The decision was effective March 3, 2008.

### Hengameh Khalilzadeh, DDS #42168

License was revoked in a default decision based on allegations of obtaining fees by fraud or misrepresentation. The decision was effective March 3, 2008.

### Bethany Heymann, RDA #65627

Probation period was extended for an additional two (2) years. Required to submit quarterly reports, be evaluated by the Diversion Program, abstain from the use of alcohol/controlled substances/dangerous drugs, subject to random drug testing and pay cost recovery. The decision was effective March 3, 2008.

### Dolores Aldrich, RDA #64100

License was revoked in a default decision based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective April 21, 2008.

### Shokrollah Bina, DDS #39233

License was revoked in a default decision based on failure to comply with a previous Board probation Order. The decision was effective April 21, 2008.

### Stipulated Settlements\*

### Savneet Anand, DDS #57554

License granted with a probationary term of three (3) years. Respondent had been found in possession of unauthorized prerecorded periodontal probe readings in an attempt to subvert the licensing examination. Required to take and pass the examination for licensure, perform community service, file quarterly reports with the Board, and take an ethics course. The decision was effective on September 28, 2007.

### Roy P. Christian, DDS # 36212

Probation was extended for an additional three (3) years for violation of Board probation Order. The decision was effective on September 28, 2007.

### Eric J. Clark, DDS #38407

License placed on probation for five (5) years as he was found to have been convicted of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, be evaluated by the Diversion Program, abstain from drugs or alcohol, subject to random drug testing and pay cost recovery. The decision was effective September 28, 2007.

### Mark Young Chul Cho. DDS #31228

License was placed on three (3) years probation based on allegations related to incompetence and acts of negligence in the treatment of a patient. Required to submit quarterly reports, take remedial education in business practices and ethics, perform community service, and pay cost recovery. The decision was effective September 28, 2007.

### Stipulated Settlements\*

### Rene Cordova, RDH #23429

License granted and placed on probation for three (3) years. Required to submit quarterly reports, pay cost recovery, work in a supervised environment and perform 40 hours of community service for each year of probation. The decision was effective September 28, 2007.

### Reggie Grimmett, DDS #20106

The Board accepted the voluntary surrender of his dental license based on his conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective September 28, 2007.

### Michael Hernandez, RDA #70043

Licensed placed on probation for a term of three (3) years for the not disclosing that he had been convicted of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, submit to biological fluid testing, abstain from drugs and alcohol, take and pass the examination for licensure, and take a law and ethics course. The decision was effective September 28, 2007.

### Dennis Romary, DDS #23028

License placed on five (5) year probation based on allegations of gross negligence in the treatment of a patient. Required to submit quarterly reports, take remedial education and pay cost recovery. The decision was effective September 28, 2007.

### Joseph Smith, DDS #18017

License placed on three (3) year probation based on allegations of gross negligence and repeated acts of negligence in the treatment of a patient. Required to submit quarterly reports, take remedial education and pay cost recovery. The decision was effective September 28, 2007.

### Michael Starkey, DDS #52140

Voluntary surrender of dental license due to his Nebraska license being disciplined for use of controlled substances and failure to comply with a treatment program. The decision was effective September 28, 2007.

### Denise Stone, RDH #23430

License granted with a probationary term of three (3) years based on convictions of crimes substantially related to the qualifications, functions and duties of a licensee. Required to submit quarterly reports, abstain from use of alcohol/controlled substances and dangerous drugs, biological fluid testing and take a law and ethics course. The decision was effective September 28, 2007.

### Jose Medellin Suarez, DDS #56535

License granted with a probationary term of three (3) years. Required to submit quarterly reports, perform community service and take an ethics course. The decision was effective October 11, 2007.

### Joshua Young, RDA #70041

License granted with a probationary term of three (3) years based on convicitions of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, abstain from use of alcohol/controlled substances and dangerous drugs, biological fluid testing and take a law and ethics course. The decision was effective September 28, 2007.

### Rosemarie Calderon, DDS #56743

Probationary license by credentials issued and placed on probation for three (3) years based on her Oregon and Washington licenses being under restrictions. Required to submit quarterly reports and take a law and ethics course. The decision was effective December 28, 2007.

### Angela Larsen, RDA #55095

License was placed on probation for a period of five (5) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Must submit quarterly reports, have a psychiatric evaluation, cost recovery, be evaluated by the Board's Diversion program, submit to biological fluid testing, and abstain from the use of alcohol and dangerous drugs. The decision was effective December 28, 2007.

### Rick Magid, RDH #20071

License was placed on probation for a period of five (5) years for conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Respondent is required to submit quarterly reports, have a psychiatric evaluation, be evaluated by the Board's Diversion program, biological fluid testing, abstain from the use of alcohol and dangerous drugs and pay cost recovery to the Board. The decision was effective December 28, 2007.

### David Lorden Baker, DDS #35674

License was placed on probation for 35 months for aiding and abetting a licensed person to practice unlawfully and practicing outside the scope of dentistry. Required to submit quarterly reports, take an ethics course, perform community service and pay cost recovery. The decision was effective March 3, 2008.

### Dana Berry, DDS #47596

License was placed on probation for three (3) years based on allegations of gross negligence and repeated acts of negligence in the treatment of a patient. Required to submit quarterly reports, take remedial education, perform community service, and take a law and ethics course. The decision was effective March 3, 2008.

### Rogel Carlos, DDS #41366

Voluntary surrender of the license. Respondent's license was disciplined by Arizona for abuse of controlled substances. The decision was effective May 19, 2008.

### Young-Ok Chang, DDS #48790

Voluntary surrender of the license based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective May 19, 2008.

### Ekaterina Galina, DDS #40820

License was placed on probation for three (3) years based on allegations of gross negligence, fraud, and repeated acts of negligence in the treatment of patients. Required to submit quarterly reports, take remedial education, take a course in law and ethics, and pay cost recovery. The decision was effective March 3, 2008.

# Disciplinary Actions September 2007 - April 2008



### Stipulated Settlements\*

### Serge Glazunov, DDS #23504

Probation extended for two (2) more years based on violation of previous Board probation order. The decision was effective March 3, 2008.

### Leon Grant, DDS #37226

License suspended indefinitely until certain conditions are met and then placed on probation for five (5) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Once on probation, required to submit quarterly reports, be evaluated by the Diversion Program, submit to medical and psychiatric evaluation, abstain from drugs or alcohol, subject to random drug testing and pay cost recovery. The decision was effective March 3, 2008.

### George Jared, DDS #30129

License was placed on three (3) years probation based on allegations of gross negligence, incompetence and excessive treatment in the treatment of a patient. Required to submit quarterly reports, take remedial education, and pay cost recovery. The decision was effective March 3, 2008.

### Michael Morrissette, DDS #34167

License was placed on probation for 35 months for aiding and abetting a licensed person to practice unlawfully. Required to submit guarterly reports, take an ethics course, perform community service and pay cost recovery. The decision was effective March 3, 2008.

### Evelyn Quintanilla, RDA #58248

License was placed on probation for two (2) years based on convicition of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports. The decision was effective March 3, 2008.

### Hannaleal De Bourg, DDS #48096

Public Reprimand was issued based on allegations of unprofessional conduct in the treatment of a patient. Required to take a remedial education program and pay cost recovery. The decision was effective May 19, 2008.

### Diane Herrera, RDA #63633

License placed on probation for three (3) years based on convicition of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, perform community service, abstain from the use of alcohol/controlled substances/dangerous drugs, biological fluid testing and take a course in ethics. The decision was effective April 21, 2008.

### Kristi Hill. RDA #48967

Voluntary surrender of license based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. The decision was effective April 21, 2008.

### Linda Johnston, DDS #42335

License was placed on probation for an indefinite period of time due to a medical condition. Required to submit quarterly reports, continue receiving psychotherapy, no solo practice. This order was effective on April 21, 2008.

### Crystal Larke, RDA #71547

License granted and placed on probation for three (3) years based on convictions of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to file quarterly reports, biological fluid testing and abstain from the use of alcohol/controlled substances/dangerous drugs. The decision was effective April 21, 2008.

### Shawna Riley, RDA #71520

License was granted and placed on probation for three (3) years based on conviction of crimes substantially related to the qualifications, functions, and duties of a licensee. Required to file quarterly reports, have a psychiatric evaluation, be evaluated by the Board's Diversion program, subject to biological fluid testing, abstain from alcohol/controlled substances/dangerous drug, and take an ethics class. The decision was effective April 21, 2008.

### Charles Byram, DDS #25680

License placed on probation for five (5) years based on alleged patient abandonment. Respondent is required to submit quarterly reports, take a course in ethics, pay restitution to patients, and pay cost recovery. The decision was effective May 19, 2008.

### Jonathan Miles, DDS #24487

License placed on probation for five (5) years based on alleged patient abandonment. Respondent is required to submit quarterly reports, take a course in ethics, pay restitution to patients, and pay cost recovery. The decision was effective May 19, 2008.

### John Allen, DDS #28270

License voluntarily surrendered based on allegation of repeated acts of negligence on a patient. The decision was effective July 3, 2008.

### Larry Hamer, DDS #43604

License was placed on probation for three (3) years based on allegations of unprofessional conduct. Required to submit quarterly reports, take an ethics course and pay cost recovery. The decision was effective June 3, 2008.

### Gloria Sizelove, RDA #57964

License was placed on probation for three (3) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, be evaluated by the Board's Diversion Program, biological fluid testing, abstain from alcohol/controlled substances/dangerous drugs, and pay cost recovery. The decision was effective July 3, 2008.

### David Alpan, DDS #43750

License was placed on probation for three (3) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, take an ethics course and pay cost recovery. The decision was effective August 2, 2008

### Siamak Jafari, DDS #49720

License was placed on probation for three (3) years based on false statement on a licensing application and conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, perform community service, be evaluated by a psychiatrist, take a course in ethics and pay cost recovery. The decision was effective August 2, 2008.

### Ricky Hung-Tak Lam, DDS #44724

License was placed on probation for seven (7) years based on allegations that he committed acts of gross negligence, incompetence and repeated acts of negligence in the treatment of patients, insurance fraud and excessive prescribing of treatment. Required to submit quarterly reports, take remedial education courses, take and pass the Board's licensing examination, take a course in ethics, work in a supervised environment, and pay cost recovery. The decision was effective August 2, 2008.

### Steve Ahn, DDS #47346

Voluntary surrender of license based on allegation of gross negligence, incompetence and repeated acts of negligence in patient treatment. The decision was effective August 2, 2008.

### Haroun Rostami, DDS #42411

License was placed on probation for 35 months based on allegations of gross negligence and incompetence in the treatment of a patient, and alleged billing for services not rendered. Required to submit quarterly reports, have a billing monitor, pay restitution, take a course in ethics, and pay cost recovery. The decision was effective August 2, 2008.

### David (Phipps) Verity, DDS # 30814

Probationary conditions were modified to allow the Respondent to treatment male patients without the physical presence of another party. The decision was effective August 2, 2008.

### Thomas Houghton, DDS #14777

Petition to modify probationary conditions was denied. The decision was effective August 2, 2008.

### Dell Goodrick, DDS #37671

License was placed on probation for four (4) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit quarterly reports, perform community service, biological fluid testing, abstain from use of alcohol/controlled substances/ dangerous drugs, participate in the Domestic Violence Abatement Program and take a course in ethics and pay cost recovery. The decision was effective August 2, 2008.

### Marili M. Moreno, RDA #72757

License granted and placed on probation for three (3) years based on conviction of a crime substantially related to the qualifications, functions, and duties of a licensee. Required to submit guarterly reports, biological fluid testing, abstain from use of alcohol/controlled substances/dangerous drugs, and a course in ethics. The decision was effective August 2, 2008.

<sup>\*</sup> For more information on DBC Disciplinary actions, go online to www.dbc.ca.gov.

# **Dental Bureau's New Office**

The Dental Bureau has moved! Our new address is:

Dental Bureau of California 2005 Evergreen Street, Suite 1550 Sacramento, California 95815-3831

Our phone numbers and e-mail have remained the same:

Phone Number: 916-263-2300 Toll Free Number: 1-877-729-7789 Fax Number: 916-263-2140 E-mail: dentalboard@dca.ca.gov.

### Office hours are 8am to 5pm Monday-Friday.

The office will be closed in observance of the following 2009 State holidays:

New Years Day Thursday, January 1, 2009

Martin Luther King Jr. Day Lincoln's Birthday Washington's Birthday Cesar Chavez Day Memorial Day Labor Day Columbus Day Veteren's Day Thanksgiving Day Day after Thanksgiving

Christmas Day

Monday, January 19, 2009 Thursday, February 12, 2009 Monday, February 16, 2009 Tuesday, March 31, 2009 Monday, May 25, 2009 Monday, September 7, 2009 Monday, October 12, 2009 Wednesday, November 11, 2009 Thursday, November 26, 2009 Friday, November 27, 2009 Friday, December 25, 2009

# **Dental Bureau Web Site**

The Dental Bureau launched its new Web site in March 2008. The Web site has a new look and feel, much like other California State Web sites. It's designed to help the reader navigate more successfully to find information. It has specific informational topics at the top of each page, including: About Us; Consumers; Licensees; Applicants; License Verification; Forms and Publications; and Contact Us. After selecting a topic, the Web site displays more specific information related to that topic. For instance, if a licensee needs to find information about Continuing Education, they would select the Licensees tab. They would be directed to a new Web page with a link to Continuing Education. Another new feature of the Web site is that it is designed to be complaint with the Americans with Disabilities Act.

Do you need to renew your license? You can do that online, so long as it is not an inactive license or is more than 60 days delinquent. Do you need to change your name or address, or apply for a permit? You can complete and print the required forms from our Web site. We also began posting disciplinary actions online, to the tune of more than 400. If a licensee had disciplinary action against his or her license, that information is available as part of the License Verification results page. We're continuously adding disciplinary actions at the rate of 100 per month, dating back to 1997. Our goal is to have all actions online within this year.

We are always looking for ways to improve our Web site, and we encourage any feedback—good or bad. Please send any thoughts, concerns, questions regarding the web site to Cady Smithline@dca.ca.gov.

# A New Addition to Our Web Site

Would you like to receive the DBC Newsletter by e-mail?



If so, please join our mailing list by signing up online at www.dbc.ca.gov to recieve the DBC Newsletter and other notifications via e-mail.

# 2009 Dental Bureau Meeting Dates

Wednesday, January 21, 2009

Wednesday, April 22, 2009

Wednesday, July 22, 2009

Wednesday, October 21, 2009

San Diego, California

To Be Determined

To Be Determined

To Be Determined

# How the Dental Bureau investigates complaints

The Dental Bureau of California licenses dentists, investigates complaints, and disciplines dentists who violate the Dentral Practice Act. The Bureau's Complaint and Compliance Unit also handles complaints against registered dental hygienists, and registered dental assistants.

### What kinds of complaints get a formal investigation?

In general, any complaint that could result in disciplinary action (for example, sexual abuse, gross negligence and/or incompetence) is referred for investigation. Other complaints investigated include fraud, health and safety violations, unprofessional conduct, and unlicensed practice. The Bureau gives priority to complaints about sexual misconduct or physical impairment or cases that present an immediate danger to patients.

### What happens when a complaint is referred to investigation?

A supervising investigator reviews the case and assigns it to an investigator. Investigators are peace officers and have the authority to pursue criminal and administrative violations of the law.

### Is the investigation confidential?

In general, the Bureau keeps details of the complaint and investigation confidential, however the complaint is discussed with the dentist or licensee involved. Any disciplinary action filed against a dentist or auxiliary as a result of an investigation is public information.

### What can the investigator do?

- Obtain dental records and other evidence.
- Interview the dentist and any subsequent treating dentist.
- Interview the person who filed the complaint.

- Interview witnesses.
- Arrange a case review by an expert consultant.
- Draft and serve subpoenas.
- Execute search warrants and affect arrests
- Conduct undercover operations.

### What is the standard of proof?

The standard of proof for administrative cases is "clear and convincing evidence to a reasonable certainty," a higher standard than for a civil litigation case which is "preponderance of the evidence."

### What if the investigation doesn't discover sufficient evidence?

If the investigation reveals that there is insufficient evidence to prove a violation, the case will be closed. The investigator will notify the person who filed the complaint and the subject of the investigation of the outcome of the investigation.

### What if the investigation finds sufficient proof?

If the investigation uncovers evidence sufficient to prove a violation, the case is reviewed by a Supervising Investigator and the Chief of Enforcement, who will decide whether or not to forward the case to the Office of the Attorney General for possible criminal or administrative prosecution or issue a citation and fine.

The complaint process can be complicated and lengthy.

# **Congratulations Rosa!**

Rosa Mata is responsible for the Licensure by Credential Program at the DBC. She became a United States citizen on March 26, 2008 with the help of her good friends Ken & Susan King, who were her sponsors. It has been a great achievement for Rosa. On the day she



was sworn in it was amazing how many people felt that becoming a citizen is a privilege.

Rosa wanted to become a citizen because she believes in speaking up for her beliefs and she also wanted to be able to vote this year. Voting was a great experience for Rosa.

# Send us your Feedback

We hope you find the DBC Newsletter useful. We welcome your comments and suggestions for future issues. You can contact us by phone at (916) 263-2300 or by email at dentalboard@dca.ca.gov. We will keep copies of the DBC Newsletter on the Dental Bureau Web site at www.dbc.ca.gov.

Employers, please share this newsletter with your staff and let them know they can sign up to receive a copy by calling us or sending us an email. If you need to update your newsletter mailing list, email Sarah Wallace at Sarah Wallace@dca.ca.gov, or call her at (916) 263-2187.

# Dental services play vital role in Victim Compensation Program

Crime often strikes without warning. An unexpected death by violence, a shooting, a sexual assault, child molestation or domestic violence complicates the healing process for victims, survivors, and family members. Crime can leave families emotionally, physically, and financially devastated.

The California Victim Compensation and Government Claims Board can help crime victims and their families' access resources to cope with the aftermath of violent crime. Every year, thousands of people turn to the Victim Compensation Program for help with paying the cost of their crimerelated dental expenses.

### Working with the Program

If you are a dentist providing services to a victim of violent crime, you may want to consider referring your client to an advocate at your local victim assistance center for help with the Program's application process. In most counties, victim advocates are part of the District Attorney's office. In addition to benefits through the Victim Compensation Program, advocates can connect crime victims with a host of other services. Applications are available at www.victimcompensation.ca.gov.

If you are currently working with a client who has already applied for compensation from the Program, the following information will help ensure your bills are paid efficiently:

- Include your client's application number on each bill. If your client does not know their application number, they can call 1-800-777-9229, or their local victim advocate for help.
- Include verification of your licensure and a completed IRS Form W-9 when you submit your first bill to the Program.
- All bills must be submitted on an approved American Dental Association (ADA) form. Required information includes treatment description and procedure codes, your license number and your federal tax identification number.

Fast and efficient payments to providers of dental services for crime victims are a top priority of the Program. To this end, our claims management system continues to be refined to ensure an expedient turn around time on provider bill processing and payment. We have also included the following enhancements to make it more convenient for providers to work with the Program:

### **Dental Preapproval Process**

Dentists can submit a dental pre-determination/authorization to the Program. The pre-treatment estimate should be submitted on a completed ADA form; however, some dental offices use their own computer generated pre-treatment estimate forms. These are acceptable; however, the ADA Dental Claim form or computer generated forms must include the following information:

- patient name and address;
- provider name and address;
- provider tax I.D. and license number;

- CDT Current Dental Terminology codes and description of services;
- charges for each procedure; and
- total charges.

Once the pre-treatment estimate is received, it will be reviewed to determine if the treatment is medically necessary and related to the qualifying crime. If the pre-treatment estimate and crime report information is not sufficient to make a determination additional information may be requested from the dental provider.

If treatment is approved or denied, a notification letter will be mailed to the provider and victim.

### Leader in Providing Services

California has been a leader in providing services to victims of violent crime for over 40 years. California was the first state to establish a Victim Compensation Program in 1965. The program has since paid nearly \$1.8 billion to help victims of crime and during the 2007-2008 fiscal year, the Program paid out \$1.3 million to cover dental expenses for crime victims.

In addition to dental treatment costs, the Program can also pay for services such as medical, mental health, funeral and burial, rehabilitation, income and support loss, and relocation benefits.

The Program is not funded by taxpayer dollars. Instead, it is funded by fines, fees and penalties paid by state and federal criminal offenders.

The California Victim Compensation Program invites you to share all of this information with your colleagues. The more providers who are aware of the program, the more victims will be able to find quality dental services.





Would you like to receive this newsletter and other Dental Bureau-related announcements and publications via e-mail?

Please visit **www.dbc.ca.gov** and sign up for a place on our new mailing list!

# The Bureau Staff

Just in case you, our readers, were curious about who works for the Bureau and in what capacity, below is a list of Bureau staff members, grouped by Unit.

### **Executive Unit**

Cathleen Poncabare, Executive Officer Richard DeCuir, Assistant Executive Officer Sarah Wallace, Administrative Analyst Susie Torres, Administrative Support, Cashier

### **Administrative Unit**

Cady Smithline, IT Administrator
Anthony Lum, Budget Analyst/Contracts
Donna Kantner, Legislative/Regulatory Analyst
Tina Wilson, Supplies/Posting Cashier/Fictitious
Name Permits

### Complaint and Compliance Unit

Lori Reis, Manager
Dawn Dill, Personnel/Training/Complaints
Oralia Mora, Dental-Cal/Citations/CAS/Spanish
Jackie Byrnes, Complaint Analyst
Jeane Ward, Complaint Analyst
Linda Garcia, Complaint Analyst
Marco Armas, Complaint Analyst
Christopher Vick, Complaint Intake
Dan Owen, Complaint Intake

### Customer Service Support Unit

Paul Loder, Office Support, License Verification Thong Dang, Board Cashier

### **Licensing Unit**

Jessica Olney, *GA/CS IV Sedation/Special Permits/OMS*Rosa Mata, *LBC/Loan Repayment, Account Posting*Virginia Marquez, *OCS/Clinics, Dental Corp.*David Wolf, *CE/Renewals/AO/Mobile Clinics*Patrice Powe, *Initial/Renewal Dental Licenses, Deceased Dentist Notification, Initial/Duplicate Pocket and Wall Certificates, Name/Address Changes* 

### **Examination Unit**

Jennifer Jackson, *Examination Analyst* Eric Rivera, *Examination Technician* 

### **Enforcement Unit—Sacramento**

Shirley Moody, *Chief*LaRita Abdul-Rahman, *Enforcement Coordinator*Cristina Hall, *Enforcement Analyst*Dee Jorz, *Enforcement Support* 

# Enforcement Unit—Tustin

Teri Lane, *Supervising Investigator I*Jimmy Zermeno, *Enforcement Suppor*t

### **Advisory Committee Members**

Suzanne McCormick, DDS, Chair
John Bettinger, DDS, Vice Chair
Stephen Casagrande, DDS, Secretary
William A. Baker, public member
Luis Dominicis, DDS
Michael Lew, DDS
Harriet Seldin, DMD, MBA
Joyce Yale, RDH